

**Indiana State Police Methamphetamine Laboratory Occurrence Report**

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 7-14-08  
Case #: 34F34224  
County: Daviess

Address: 1015 EAST ST  
ELMORA IN

**Type of Laboratory Seizure (check one)**

- ☐ Operational Lab  
☒ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

**Seizure Location (check all that apply)**

- ☒ Residence  
☒ Outbuilding  
☐ Vehicle  
☐ Hotel/Motel  
☒ Open - No Structure  
☐ Other:

**Items Found: Location (bedroom, kitchen, open air, etc)**  
(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): \_\_\_\_\_  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☒ Flammable Solvents: Kitchen  
☒ Water Reactive Metal (Lithium): Reaction of officer Dietrich  
☐ Anhydrous Ammonia: \_\_\_\_\_  
☒ Hydrochloric Acid Gas Generator(s): Outside  
☒ Corrosive Acid: Bathroom  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): \_\_\_\_\_

**Child under age 18 discovered (check one)**

- ☐ Yes \_\_\_\_\_ (number present)  
☒ No

\*If yes, fax report to Child Protective Services

**Investigative Information**

- ☐ Ephedrine/Pseudoephedrine Tracking Log  
☐ Retail/Merchant Tip  
☐ Other: \_\_\_\_\_

**This report is to be faxed to the following agencies that serve the location:**

Fire Department: ELMORA VFD  
Health Department: Daviess Co.  
Child Protection Service: \_\_\_\_\_

Fax: 812 692 5828  
Fax: 812 254 3443  
Fax: \_\_\_\_\_

For further information regarding this methamphetamine laboratory, contact  
Investigating Officer: TRP Ryan Johnson Phone 812 867-2079

\*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department  
listed within 24 hours of scene processing.

\*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.